UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC US	E ONLY
Prefix	Serial
DATE R	ECEIVED

DE

OMB APPROVAL

3235-0076

May 31, 2005

OMB Number:

Estimated average burden Hours per response: 16.00

Expires:

	UNIFORM LIMITED OFFERING EXI	EMPTION		
	if this is an amendment and name has changed, a ity Fund – Friends & Family, L.P. (f/k/a SP Capi			P.).
Filing Under (Check box(es) that	at apply): 🗌 Rule 504 📗 Rule 505 🛛 Rul	le 506 🔲 Section	1 4(6) ULOE	
Type of Filing: New Fili	ing Amendment			3.700
	A. BASIC IDENTIFIC	CATION DATA		
1. Enter the information request	ed about the issuer		e Cart T	
,	is is an amendment and name has changed, and in ity Fund – Friends & Family, L.P. (f/k/a SP Capi	• ,	- Friends & Family, L.F	P.)
	fumber and Street, City, State, Zip Code) Floor, New York, New York 10017		Telephone Number (I	ncluding Area Code)) 485-4370
Address of Principal Business O (if different from Executive Office	perations (Number and Street, City, State, Zip Cces)	ode)	Telephone Number (I	including Area Code)
Brief Description of Business	To operate as a private investment partnership).		PROCECO
Type of Business Organization				NOV 2 2 2004
corporation	limited partnership, already formed	othe	er (please specify):	THOMACO
business trust	limited partnership, to be formed			FINANCIAL
Actual or Estimated Date of Inco	Month orporation or Organization: 06 Organization (Enter two-letter U.S. Postal Service)	Year 02 ce abbreviation for		imated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			A. BASIC IDEN	TIFICATION DATA		
2.	Enter the informat	ion requested for th	e following:			
	o Each promote	er of the issuer, if th	e issuer has been organized	within the past five years;		
	o Each benefic of the issuer;	•	e power to vote or dispose,	or direct the vote or disposition	of, 10% or more o	f a class of equity securities
	o Each executiv	ve officer and direct	or of corporate issuers and	of corporate general and mana	ging partners of par	tnership issuers; and
	o Each general	and managing parts	ner of partnership issuers.			
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General Partner
Full Nan	ne (Last name first, SSP Associates G	· ·				
Business	or Residence Addr		er and Street, City, State, Zipork, New York 10017	p Code)		
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Member of the General Partner
Full Nan	ne (Last name first, Stamos Partners A					
Business	or Residence Addr		er and Street, City, State, Zi	p Code)		
Check B	ox(es) that Apply:	Promoter Promoter	ork, New York 10017 Beneficial Owner	☐ Executive Officer	Director	Managing Member of the Managing Member of the General Partner
Full Nan	ne (Last name first, Stamos, Peter S.	if individual)				
Business	or Residence Addi	ess (Number 40 th Floor, New Y	er and Street, City, State, Zi ork, New York 10017	p Code)		
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (Last name first,	if individual)				y Transcription of the Control of th
Business	or Residence Addi	ress (Number	er and Street, City, State, Zi	p Code)		<u> </u>
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Nar	ne (Last name first,	if individual)				
Business	s or Residence Add	ress (Number	er and Street, City, State, Zi	p Code)		
Check B	ox(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Nar	ne (Last name first,	if individual)				
Business	s or Residence Add	ress (Numb	er and Street, City, State, Zi	p Code)		
Check B	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Nar	ne (Last name first,	if individual)				
Business	s or Residence Add	ress (Numb	er and Street, City, State, Zi	p Code)		
92903	66.13	(Use blan		ditional copies of this sheet, as 2 of 8	necessary.)	SEC 1972 (1/94)

				В.	INFORMA	TION ABO	OUT OFFE	RING				
2. Wha	he issuer solo Answer also t is the minin *Subject to t	o in Append num investn	lix, Columi nent that w	n 2, if filing ill be accep	g under ULoted from an	OE. 1y individu	al	_		<u>\$1.</u>	No ⊠ 000,000*	-
4. Enter remu agen	the offering the informaneration for t of a broker ons to be liste	tion request solicitation or dealer re	ed for each of purchase gistered wi	person whers in conn the SEC	no has been ection with and/or with	or will be sales of se h a state or	paid or give curities in t states, list	en, directly he offering the name of	or indirect . If a perso f the broker	ly, any con on to be list or dealer.	mmission or ed is an ass	sociated person or an five (5)
Full Name (L	ast name first	t, if individu	ual)									
Business or R	esidence Adoricho Plaza,				tate, Zip Co	ode)						
Name of Asso Firs	ociated Broke at Long Island					·						
States in which (Check	ch Person Lis "All States"				olicit Purch	asers					☐ Al	l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (L	ast name firs	t, if individ	ual)									
Business or R	esidence Ad	dress (Num	ber and Str	eet, City, S	tate, Zip C	ode)						
Name of Asso	ociated Broke	er or Dealer										
States in which (Check	ch Person Lis "All States"				olicit Purch	asers					⊠ Al	l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (L	ast name firs	t, if individ	ual)							P. C. II.		
Business or F	lesidence Ad	dress (Num	ber and Str	eet, City, S	State, Zip C	ode)						
Name of Asse	ociated Broke	er or Dealer	,									
States in which	ch Person Lis "All States"				olicit Purch	asers					☐ Ai	l States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[СА] [КҮ] [NJ] [ТХ]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already so "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the col the securities offered for exchange and already exchanged.					
			Aggregate Offering			Amount Already
	Type of Security		Price		_	Sold
	Debt		0		<u>\$</u>	0
	Equity	\$	0	:	\$	
	[] Common [] Preferred					
	Convertible Securities (including warrants)		0		\$	0
	Partnership Interests		,000,000		\$37,	802,637
	Other (Specify)	\$	0		\$	0
	Total	\$\$30	00,000,000		\$37,	802,637
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offer amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have praggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				the	
			Number Investors		- 1	regate Dollar Amount of Purchases
	Accredited Investors		65		\$37,	802,637
	Non-accredited Investors		0		\$	0
	Total (for filing under Rule 504 only)	_			\$	_
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offertype listed in Part C - Question 1.		Classify se	ecuritie		
	Type of Offering		Type Secu			Dollar Amount Sold
	Rule 505			•	\$	
	Regulation A				- \$	
	Rule 504				- \$	
	Total				<u>-</u> \$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securitie amounts relating solely to organization expenses of the issuer. The information may be given as subjet the amount of an expenditure is not known, furnish an estimate and check the box to the left of the est	s in th	uture conti		ıde	
	Transfer Agent's Fees		•••••	[]	\$	0
	Printing and Engraving Costs		•••••	[x]	\$	<u>`</u> *
	Legal Fees		•••••	[x]	\$	*
	Accounting Fees			[x]	\$	*
	Engineering Fees	•••••		[]	\$	30
	Sales Commissions (specify finders' fees separately)			[]	- \$	50
	Other Expenses (identify)			[X]		
	Total				_	550,000 *
	*All offering and organizational expenses are estimated not to exceed \$50,000.				_	

9290366.13

				ES AND US				
b. Enter the difference between the aggregate offering price given in rexpenses furnished in response to Part C - Question 4.a. This different issuer."	ce is the	'adj	usted	gross procee	ds to the		\$299,950,000	
Indicate below the amount of the adjusted gross proceeds to the issuer purposes shown. If the amount for any purpose is not known, furnish estimate. The total of the payments listed must equal the adjusted gros C - Question 4.b above.	an estima	ite a	ınd cl	neck the box	to the left	of th		
				Payments Officers Directors, Affiliate	, &		Payments to Others	
Salaries and fees		[]	\$	[]	\$	
Purchase of real estate	•••••	[]	\$	[]	\$	
Purchase, rental or leasing and installation of machinery and equipme	nt	[]	\$	(]	\$	
Construction or leasing of plant buildings and facilities		}]	\$	[]	\$	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets o securities of another issuer pursuant to a merger)		[] .	\$	[]	\$	
Repayment of indebtedness	······	[]	\$]	\$	
Working capital		[]	\$	[}	\$	
Other (specify): Investment Capital	···	[:]	\$	{:	X]	\$299,950,000	
·								
·	<u>.</u>			•				
Column Totals	******	[]	\$	(:	X]	\$299,950,000	
Total Payments Listed (column totals added)				[X] \$299,	950,0	000	
D. FEDERA	AL SIGN	ATI	JRE					
e issuer has duly caused this notice to be signed by the undersigned duly nature constitutes an undertaking by the issuer to furnish to the U.S. Secondarion furnished by the issuer to any non-accredited investor pursuant	curities ar	id É	xcha	nge Commiss	sion, upon			
uer (Print or Type)	Signature	7		, ,	7	1	Date	
rling Stamos Security Fund - Friends & Family, L.P.	P)	K	<u>-</u>	1/		/	10/21/04	
ne of Signer (Print or Type)	Title of Si	gne	r (Pri	nt or Type)				
er S. Stamos	Managin	aging Member of the Managing Member of the General Parts						

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

-74	E. STAT	E SIGNATURE
1.	Is any party described in 17 CFR 230:262 presently subject to any	Yes No of the disqualification provisions of such rule?
	See Appendix, Column 5, for	state response. Not applicable
2.	The undersigned issuer hereby undertakes to furnish to any state (17 CFR 239.500) at such times as required by state law. Not app	administrator of any state in which this notice is filed, a notice on Form D licable
3:	The undersigned issuer hereby undertakes to furnish to the state a offerees. Not applicable	administrators, upon written request, information furnished by the issuer to
4.		the conditions that must be satisfied to be entitled to the Uniform Limited is filed and understands that the issuer claiming the availability of this to been satisfied. Not applicable
	e issuer has read this notification and knows the contents to be dersigned duly authorized person.	true and has duly caused this notice to be signed on its behalf by the
Iss	suer (Print or Type)	Signature Date
Ste	erling Stamos Security Fund - Friends & Family, L.P.	fet 1/ 10/21/04
Na	ame (Print or Type)	Title (Print or Type)
Pe	ter S. Stamos	Managing Member of the Managing Member of the General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

			Sterling Stan	nos Security	Fund – Friend	s & Family, L	<u>.P.</u>		
1	Intend to	o sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Limited Partnership Interests \$300,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AK		1						1	
AL									
AR									
AZ									
CA		X	X	9	\$3,475,000	0	0		
СО									
CT		X	X	2	\$100,000	0	0		
DC									
DE									
FL		X	X	1	\$100,000	0	0		
GA									
HI									
IA									
ID									
IL									
IN									
KS									
KY									
LA						<u> </u>			
MA									
MD		Х	X	2	\$100,000	0	0		
ME					1				
MI							 -		
MN									
МО									
MS									
MT									
									

APPENDIX

	,		Sterling Stan	os Security	Fund – Friend	s & Family, L	.Р.		5	
1	Intend to	o sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests \$300,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NC	ļ									
ND										
NE		<u> </u>								
NH										
NJ	<u> </u>	X	X	2	\$420,000	0	0			
NM										
NV	ļ	-			ļ 			<u> </u>		
NY		X	X	47	\$31,507,637	0	0	<u> </u>		
OH	 									
OK OR	 		<u> </u>							
PA	-									
PR	 									
RI	-	X	X	1	\$2,000,000	0	0			
SC				<u> </u>	\$2,000,000	+				
SD	 	 				 				
TN										
TX		X	X	1	\$100,000	0	0			
UT										
VA			 							
VT										
WA								-		
WI							!			
wv							!			
WY										